

MAIL TO:
Office of the Attorney General
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470

STREET ADDRESS:
1300 I Street
Sacramento, CA 95814
Telephone: (916) 323-5079

WEB SITE ADDRESS:
<http://ag.ca.gov/charities/>

COMMERCIAL FUNDRAISER FOR CHARITABLE PURPOSES

ANNUAL FINANCIAL REPORT FOR 20 03

(California Government Code Section 12599)

Failure to file annual financial report by January 30th annually for each calendar year of solicitation may result in late fees as defined in Government Code Section 12586.1

An annual financial report must be filed for each event for each charity solicited for during the previous calendar year.



Name and Address of Commercial Fundraiser:

1114

ALARUS AGENCY, THE
2107 3RD AVENUE
SAN DIEGO, CA 92101

Name and Address of Charitable Organization:

CT No. 73160

F.E.I.N. No. 33 0363163

Name of charity STAR PAL

Address of charity 4110 54TH ST.

City, State, and ZIP code of charity SAN DIEGO, CA 91941

Figures from (check one): National Campaign ☐ California Campaign ☐

Building Campaign
(Type of activity)

held (on) (from) June

, 20 02

to March

, 20 03

(Date or dates must be shown)

Is the contract between the commercial fundraiser and charity based upon a fee or percentage of revenue? Fee ☐ Percent age ☐ Other ☒

If other, provide brief explanation Flat Fee

1. REVENUE

A. Cash contributions

B. Entertainment sales or admission charges

C. Sales from products

D. Advertisement sales

E. Membership fees

F. Other sources: (Specify)

a. _____

b. _____

c. _____

d. _____

G. TOTAL REVENUE

A. _____

B. _____

C. _____

D. _____

E. _____

Fa. _____

Fb. _____

Fc. _____

Fd. _____

\$1,000.00

G

2. EXPENSES

A. Fees or commissions

B. Salaries

C. Payroll taxes

D. Employee benefits

E. Cost of merchandise for resale

F. Cost of entertainment

G. Postage

H. Advertising

I. Telephone

J. Rental of equipment

K. Facilities charge

L. Permits

M. Other expenses: (Specify)

a. printing

b. _____

c. _____

d. _____

N. TOTAL EXPENSES

54.000

A. _____

B. _____

C. _____

D. _____

E. _____

F. _____

G. 500

H. _____

I. _____

J. _____

K. _____

L. _____

Ma. 1500

Mb. _____

Mc. _____

Md. _____

56.000

N.

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☐ Yes ☒ No If "yes" complete the following:

(b) For each affiliation identified in 7(a), attach copy of the contract between the commercial fundraiser and the charity.

Date _____

Date _____

Date